## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE.
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MINTZ, LEVIN, COHN, FERRIS, GLOVSKY AND POPEO, P.C. ONE FINANCIAL CENTER BOSTON, MA 02111						I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (371) 273-2885, on the date indicated below.					
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						(Signature)					
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APPLICATION NO.	FILING DATE	FILING DATE			₹TOR	ATTORNEY DOCKET NO.		CONFIRMATION NO.			
10/632,086	86 08/01/2003			Rick Kiessig	25396-006				3391		
TITLE OF INVENTION AND OTHER FEATUR	: SYSTEM AND MET ES	HOD FO	R MANAGING		VENT	DRIVEN ACTIO	ONS TO		RKFLOW		
APPLN, TYPE	SMALL ENTITY	ISSU	JE FEE DUE	PUBLICATION FEE D	DUE I	PREV. PAID ISSUE	E FEE	TOTAL FEE(S) DUE	T	DATE DUE	
nonprovisional	YES		\$720	\$300		\$0	•	· \$1020		05/06/2008	
EXAMINER ART UNIT				CLASS-SUBCLASS	s						
LEWIS, CHERYL RENEA 2167				707-001000	707-001000						
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1,543).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached.  Here Address form FTO/SB/12 attached.  Fee Address" indication (or Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the pattent front page, list (1) the names of up to 3 registered pattent algoritys or agents OR, alternatively, or agents OR, alternatively. (2) the name of a night firm (having is a mombher a rejistered attorney or agent) and the names of up to listed, no name with be printed: (assembly a name of the names of up to listed, no name with be printed: (assembly name of the names of up to listed, no name with be printed: (assembly name of the							
3. ASSIGNEE NAME AT	ND RESIDENCE DATA	A TO BE	PRINTED ON	THE PATENT (print o	or type	)					
PLEASE NOTE: Unli recordation as set forth	ess an assignee is ident in 37 CFR 3.11. Com			data will appear on the T a substitute for filing	he pate g an as	ent. If an assigne signment.			ocument l	has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)											
Mathon Sy	stems, Inc.			Los Altos	3 , C	A,					
Please check the appropri	ate assignee eategory or	categorie	es (will not be pr	inted on the patent):	O is	ndividual 🖾 Co	rporati	on or other private gre	up entity	Government	
ia. The following fee(s) are submitted:  4b. Payment of Fee(s):						e first reapply an	y prev	lously paid issue fce	shown ab	ove)	
☑ Issue Fee ☐ A check is enclor ☑ Publication Fee (No small entity discount permitted) ☐ Payment by cred						it card. Form PTO-2038 is attached.					
Advance Order - A		The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 0-0311 (enclose an extra copy of this form).									
a. Applicant claims	us (from status indicate SMALL ENTITY state	us. See 37		☐ b. Applicant is no							
NOTE: The Issue Fee and interest as shown by the r	Publication Fee (if req ecords of the United Sta	uired) wil itcs Paten	I not be accepted and rademark	I from anyone other the	han the	applicant; a regis	stered a	ttorney or agent; or th	c assigno	e or other party in	
Authorized Signature G Tay						Date <u>May 6, 2008</u>					
Typed or printed name	Registration No. 57, 197										
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